

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE/TERRITORY: Georgia

CASE MANAGEMENT SERVICES

A. Target Group:

Children in grades Pre K-12 and their Medicaid eligible siblings who are "at-risk" of not completing a secondary education program because they exhibit three or more of the following characteristics:

1. Within the low socio-economic level as evidenced by participation in the free or reduced lunch program, have parents who are unemployed, or employed but with frequent difficulties in money management.
2. Within a minority population or experiencing difficulties with cultural competencies or language proficiencies.
3. No EPSDT initial screening or lack of ongoing medical care/health maintenance due to difficulty in accessing health care providers.
4. Low achievement test scores, (35th percentile and below on ITBS, TAP), low grades, (failing two or more academic subjects in a grading period), or repeated two or more grades.
5. Frequent absences, tardiness or school transfers.
6. Frequent disciplinary referrals or suspensions.
7. Frequent physical complaints, low self-concept, or expresses feelings of lack of control of life.
8. Minimal social interaction with peers, limited extra curricular involvement, alienation from school with a potential to drop out.
9. History of substance abuse, Juvenile Court involvement, or at risk for sexually transmitted disease.

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SUPERSEDES 92-37

10. History of exposure to direct or indirect violence.
11. History of sexual or physical abuse or neglect.
12. Dysfunctional home situation.
13. Born to a teenage mother or single parent.
14. Pregnancy.

B. Areas of State in which services will be provided:

☐ Entire State.

☒ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide): The attendance zones of the following Houston County Schools: Perry & Thomas Elementary; Perry & Tabor Middle; and Northside & Perry High.

C. Comparability of Services

☐ Services are provided in accordance with Section 1902(a)(10)(B) of the Act.

☒ Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(2) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

D. Definition of Services:

Children at-risk case management is a set of interrelated activities for identifying, coordinating, and reviewing the delivery of appropriate services for eligible at-risk children. The purpose of case management services is to assist those targeted at-risk children in gaining access to needed medical, nutritional, social, educational, transportation, housing, and other services; and to encourage the use of various community resources through referral to appropriate providers. Case management services will provide necessary coordination with providers of health, family support, employment, justice, housing counseling, nutrition, social, educational, transportation, and other services when needed.

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The set of interrelated activities are as follows:

1. Establishing the comprehensive case file for development and implementation of an individualized service plan to meet the assessed service needs of the eligible child. Establishing priorities for initial linkages with providers. This unit of service may be billed only once for each eligible child.
2. Assistance to the eligible child in locating needed service providers and making the necessary linkages to assure the receipt of services identified in the service plan.
3. Monitoring and follow-up with eligible child and service providers to determine that the services received are adequate in meeting the child's assessed needs. Case management follow-up services are limited to 12 visits annually.
4. Reassessment of eligible children to determine the services needed to resolve any crisis situation resulting from divorce, death, separation, family structure changes, changes in living conditions, or other events.

E. Qualification of Providers:

1. Provider Qualifications

Enrollment will be accomplished in accordance with Section 1902(a)(23) of the Act. Enrollment is open to all providers who can meet the following requirements:

- a. Must have qualified case manager(s) and the capacity to provide the full range of at-risk case management services.
- b. Must meet the applicable state and federal laws governing the participation of providers in the Medicaid program.

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- c. Must have demonstrated direct experience in the coordination of educational support services (e.g., EPSDT, Social Services, Counseling Services, Psychological Services, Student Assistance, Special Education, and Nutritional Services).
- d. Must have demonstrated the ability to obtain collaboration between public and private service providers.
- e. In order to avoid duplication of services and to promote effective community level networking, case management providers must have a signed collaborative agreement with the Houston County Schools, Houston County Department of Family and Children Services, Houston County Youth Services, Houston Drug Action Council, Houston County Commissioners, Court Appointed Special Advocate (CASA), Rainbow House, Inc., Middle Georgia Community Action Agency, Juvenile Court of Houston County, Peachbelt Mental Health Center, Houston County Health Department.
- f. Case Management Supervisor(s) must have 4 years experience in a human service field; (i.e., nursing, psychology, sociology, social work, humanities, counseling or career services), and 2 years of supervisory experience working with low income indigenous children and their families.
- g. Case Manager(s) must have 2 years experience in a human service field; (i.e., nursing, psychology, sociology, social work, humanities, counseling, career services).
- h. Both the case management supervisor(s) and case management staff person must complete a pre-service training program and a Family Connection designed and supervised practicum experience, and have a broad knowledge of local resources.

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- F. The state assures that the provision of case management services will not restrict an individual's free choice of providers in violation of Section 1902(a)(23) of the Act.
1. Eligible recipients will have free choice of the providers of case management services.
  2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Georgia

AT-RISK OF INCARCERATION CASE MANAGEMENT SERVICES

- A. **Target Group:** All Medicaid eligible emotionally disturbed or substance abusing beneficiaries under twenty-one years of age at-risk of incarceration who have been referred to a Foster Home or a non-residential intensive supervision program as an alternative to a secure confinement facility.
- B. **Areas of State in which services will be provided:**
- ☒ Entire State.
- ☐ Restricted Geographical Area
- C. **Comparability of Services:**
- ☐ Are provided in accordance with Section 1902\*(a)(10)(B) of the Act.
- ☒ Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.
- D. **Definition of Services:**
- Case Management is a set of interrelated activities for identifying, coordinating, and reviewing the delivery of appropriate services for EPSDT eligible emotionally disturbed or substance abusing Medicaid beneficiaries at-risk of incarceration. The purpose of case management services is to assist individuals in the target group in gaining access to needed medical, nutritional, social, educational, transportation, housing and other services; and to encourage the use of various community resources through referral to appropriate providers.

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Case Management is performed through a set of interrelated activities which include the following:

1. Establishing the comprehensive case file for development and implementation of an individualized service plan to meet the assessed service needs of the child.
2. Assisting the child in locating needed service providers and making the necessary linkages to assure the receipt of services identified in the service plan.
3. Monitoring the child and service provider to determine that the services received are adequate in meeting the child's needs.
4. Reassessment of the child to determine services needed to resolve any crisis situation resulting from divorce, death, separation, changes in family structure or living conditions, or other events.

**E. Qualifications of Providers:**

All providers, agencies and individual practitioners must:

1. Follow the mandates at 42 CFR 431 Subpart F regarding confidentiality.
2. Demonstrate the capacity to provide all core elements of case management services.

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**E. Qualifications of Providers (Continued)**

3. Provide accurate documentation of costs and agree to participate in an annual cost study to determine reimbursement rates for service.
4. Document and maintain case records in accordance with state and federal requirements.
5. Maintain such records as are necessary to fully disclose the extent of services provided and to furnish the Department with information as it may periodically request.

All providers, agencies and individual practitioners must ensure that case managers:

6. Demonstrate skills in the process of identifying and assessing a wide range of children's needs, including antisocial behavior patterns, faulty attitude structure, healthy social adjustment, family interrelationships, and the establishment and attainment of life goals;
7. Demonstrate skills in assessing problems and needs of juvenile offenders;
8. Demonstrate skills in enlisting the cooperation of individuals of various backgrounds to develop remedial human service delivery programs for youthful offenders;
9. Are knowledgeable about local community resources and how to use those resources for the benefit of the child;
10. Demonstrate skills in recognizing drugs, symptoms of drug addiction, and the physical effects of drug abuse;
11. Are graduates of a college or university with an undergraduate degree in Psychology, Sociology, Social Work, Criminal Justice or a related field, or have four years work experience in the juvenile justice system; and

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E. Qualifications of Providers (Continued)

12. Are knowledgeable about the state's standards and policies related to community services for clients in the custody of the Department of Children and Youth Services.
13. Complete a practicum designed and supervised by the Department of Children and Youth Services. All potential providers may attend the practicum.
14. Maintain regularly scheduled hours of operation and include provisions for recipients to receive services outside normal business hours.
15. Be accessible to and willing to coordinate services within the recipient's residential/community setting as necessary.

F. The state assures that all eligible recipients will have free choice of providers as provided in Section 1902(a)(23) of the Act. The state assures that all qualified providers may participate in this program.

1. Eligible recipients will have free choice of the providers of case management services.
2. Eligible recipients will have free choice of the providers of other medical care under the plan.

G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same service.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
State/Territory: Georgia

CASE MANAGEMENT

A. Target Group:

Medicaid recipients 21 years of age and older who have been diagnosed as having AIDS or symptomatic HIV disease as indicated through accepted testing procedures and as defined by the Centers for Disease Control, who are at the greatest risk of hospitalization, and who need specific intervention assistance with acute problem solving in one or more of the following situations:

1. acute medical needs such as respite care, dialysis, home health care, and services required during the later stages of illness;
2. loss of access to care;
3. substance abuse;
4. mental illness;
5. homelessness; or
6. crisis such as unplanned pregnancy, loss of employment or social support.

Optional targeted case management services will not be provided to clients in total care environments.

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